CAMP	AIGN CONTRIBUTIONS AND EXPENSE	-				State of Nevada
k	Offer Haracia	Dist C4 (if applicable)	Indg e	- Dept	14	District (if applicable)
Name (pr	2275 Springdale Ct		o NV	89523		787-7200
lailing A	ddress (include city and zip code)			Teleph	one No.	
-Mail Ad						
elect A	ppropriate Box(es) CANDIDATE PAC	POL PRTY	] IND EXP	NONPROF	IT CORP	
	☐ LEGAL DEFENSE FUND	MENDED				
]	Annual Filing - Due January 15, 2008 Period: January 1, 2007 - December 31, 2007					
	Report #1 — Due August 5, 2008* Period: Jan. 1, 2008 — July 31, 2008					2000 REGI
Z	Report #2 Due — October 28, 2008* Period: Aug. 1, 2008 — Oct. 23, 2008					OCT STR/
	Report #3 Due — January 15, 2009*/** Period: Oct. 24, 2008 — Dec. 31, 2008					28
	Annual Filing – Due January 15, 2009 Period: January 1, 2008 – December 31, 2	008		L	FOR O	FFICE USE ONLY
* T	hese Reports are filed by incumbents/cand hird Report suffices for 2009 Annual Filing	lidates running	for office so filed Re	in the 2008 e	election c and 2	
	CONTRIBUTIONS SUMMARY				is Period	Cumulative From Beginning of Report Period #1 through End of This Reporting
1	. Total Monetary Contributions Received in Excess of \$1	00		1.1	400-	9, 114, 63
2	(See page 1 of instruction sheet)  Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)				ø	175-
3	Total Monetary Contributions in the form of loans gua party. (See page 2 of instruction sheet)	ranteed by a third			ø	ø
4	Total Monetary Contributions in the form of loans that (See page 2 of instruction sheet)	were forgiven	Cumulative l		\$	4
		This Period	Beginning of Report Period			
			Through End This Reporti			
5	. Total Amount of Monetary Contributions		Period			1
	Received (Add Lines 1 through 4) (See page 2 of instruction sheet)			1,4	100 -	9,289 6
6	. Total Amount of Written Commitments for					
	Contributions (When commitment is funded, report as contribution (monetary or in kind))	ø	\$			
7	(See page 2 of instruction sheet)  Total Value of In Kind Contributions Received in	d	750			
	Excess of \$100 (See page 2 of instruction sheet)	<u> </u>	1 /20			
		EXPENSES SUI	MMARY			
8	. Total Monetary Expenses Paid in Excess of \$100			,	228-	179774
	(See page 2 of instruction sheet)  Total Monetary Expenses Paid of \$100 or Less				10	1,111,
	(See page 2 of instruction sheet)				4	364, -
1	O. Total Amount of All Monetary Expenses Paid  (Add Lines 8 and 9) (See page 2 of instruction s	heet)		1.	228	8,341.73
1	Total Value of In Kind Expenses in Excess	<b>Ø</b>	1 4			
1	of \$100 (See page 3 of instruction sheet) 2. Disposition of Unspent Contributions					
1	Only reported on Report #3, Annual Report or 15th					
	lay of the second month after candidates defeat or numbent does not run for reelection)	N	IA			
(	See page 3 of instruction sheet)					
10	Declare Under Penalty of Perjury That the F	AFFIRMAT oregoing is Tre		rect.		
	Ant				10/	28/08
Signatur	1 by W				Date	
aumosti ir					Date	

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List
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Contributors
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ame	Street	City, State	Zip Code Da	Date of Contribution Amount	0	Sheck box if loan
Roger & Dawn Harada 2275 Springda Paul Quade 216 E. Liberty Steve Biagiotti 5550 Lausanr 5365 Mae Ani Mt. Rose Rep. Woman's Club P.O. Box 1844	2275 Springdale Ct. 216 E. Liberty St. 5550 Lausanne Dr. 5365 Mae Anne Ave. P.O. Box 18446	Reno, NV Reno, NV Reno, NV Reno, NV Reno, NV	89523 89501 89511 89523 89511	9/19/08 10/3/08 10/20/08 10/30/08	500.00 250.00 250.00 100.00 300.00	×

Roger Harada Name (print)

Office (if applicable)

District (if applicable)

## IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 7 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN
None this	Period					
			to particular to the particula			

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#2

Roger Harada

7;5+.
Office (if applicable)

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## Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
NV Political Advertising 149 Arletta, #4 Reno NV 89503	D	9/19/08	#500-
A. Carlisle Printing 1080 Bible Way Reno Nu 89510	D	10/6/08	#728-

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